

McHenry County Department of Health
Confidential: Influenza Like Illness (I.L.I.) Outbreak
RESIDENT Line List

NAME <i>(Last Name Only)</i>	ROOM #	AGE	GENDER	VACCIN- ATED (Y/N)	SYMPTOM ONSET DATE	SYMPTOMS** <i>(when meeting case definition)*</i>	SYMPTOM COMPLETION DATE	LAB SPECIMENS		HOSPITALIZATION	
								DATE COLLECTED	RESULTS	ADMIT DATE	DATE DISCHARGED

*CASE DEFINITION: Fever, defined as temperature $\geq 100^{\circ}$ F (37.8 $^{\circ}$ C) and new onset of cough or sore throat.

** Please use "F" for Fever and "C" for Coughing and/or "ST" for Sore Throat